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Annli	cation Dat	a She	et 37 CFR	1 76	Attorne	ey Dock	et Nu	ımber						
, (pp.				•	Applica	ation Nu	umbe	r						
Title of	Invention	SYSTE	EM AND PRO	CESS F	OR FACIL	LITATING	G THE	PROVIS	SION O	F HE	EALTH CA	ARE		
bibliogra This doo	lication data she phic data arrang cument may be nt may be printe	ged in a fo complete	ormat specified ed electronically	by the U	nited States omitted to t	Patent a	nd Tra	demark O	ffice as	outlin	ed in 37 C	FR 1.76.		
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	ortions or all of CFR 5.2 (P													ursuant to
Appli	cant Info	rmati	ion:											
Applic	ant 1											Remov	/e	
Applic	ant Authorit	y • Inv	ventor OL	egal Re	presentati	ve under	35 L	J.S.C. 11	7	ОР	arty of Int	erest und	der 35 U	J.S.C. 118
Prefix	Given Nam	ie	I	N	liddle Na	me			Fam	ily Name			Suffix	
	MICHAEL				DAVID				BUIS	ST.	T			
Resid	ence Inform	ation (S	Select One)	O US	S Residence	су 🧿	) No	n US Res	sidency	' (	Active	US Milit	ary Serv	rice
City	Malvern, Vict	oria		Cour	try Of Re	esidend	:ei	AU						
Citizer	nship under	37 CFR	R 1.41(b) <sup>i</sup>	AU										
Mailing	g Address o	f Applic	cant:											
Addre	ss 1	1	6 Ethel Stree	t										
Addre	ss 2													
City	Malvern	, Victoria	a				State	e/Provin	ice					
Postal	Code	3	3142			Coun	ıtry <sup>i</sup>	AU						
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Custo	mer Number		22885											
Email	Address										Add Er	nail	Remo	ve Email
Appli	cation In	forma	ation:											
Title o	f the Inventi	on	SYSTEM A	ND PR	OCESS FO	OR FAC	ILITA	TING THE	E PRO	VISIO	ON OF HE	ALTH C	ARE	
Attorney Docket Number					Small Entity Status Claimed 🗸									
Application Type Nonprovisional				onal										
Subjec	ct Matter		Utility											
Sugge	sted Class (	if any)					S	ub Class	s (if ar	ıy)				
Sugge	sted Techno	ology C	enter (if any	y)			1							
Total Number of Drawing Sheets (if any)				ıny)			Si	uggeste	d Figu	ıre f	or Publi	cation (	if any)	

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Application Data S	heet 37 CED 1 76	Attorney D	ocket Number						
Application Data 3	ileet 37 Cl K 1.70	Application	n Number						
Title of Invention SYSTEM AND PROCESS FOR FACILITATING THE PROVISION OF HEALTH CARE									
Publication Informatio	n:								
Request Early Pub	lication (Fee required at	time of Rec	uest 37 CFR 1.219)	1					
Request Not to Publish. I hereby request that the attached application not be published under 35 U.S.C. 122(b) and certify that the invention disclosed in the attached application has not been and will not be the subject of an application filed in another country, or under a multilateral agreement, that requires publication at eighteen months after filing.									
Representative I	nformation:								
Representative information should be provided for all practitioners having a power of attorney in the application. Providing this information in the Application Data Sheet does not constitute a power of attorney in the application (see 37 CFR 1.32). Enter either Customer Number or complete the Representative Name section below. If both sections are completed the Customer Number will be used for the Representative Information during processing.									
Please Select One:	Customer Number	O US	Patent Practitioner	O US	Representat	tive (37 CFR 11.9)			
Customer Number	22885								
Domestic Priority Information:  This section allows for the applicant to claim benefit under 35 U.S.C. 119(e), 120, 121, or 365(c). Providing this information in the application data sheet constitutes the specific reference required by 35 U.S.C. 119(e) or 120, and 37 CFR 1.78(a)(2) or CFR 1.78(a) (4), and need not otherwise be made part of the specification.									
Prior Application Stat		modulori.			Rer	move			
Application Number	Continuity T	vpe	Prior Application Number			Filing Date (YYYY-MM-DD)			
The Application Trained Timing Bate (TTTT-WINT-BE									
Additional Domestic Priority Data may be generated within this form by selecting the Add button.									
Foreign Priority I	nformation:								
This section allows for the applicant to claim benefit of foreign priority and to identify any prior foreign application for which priority is not claimed. Providing this information in the application data sheet constitutes the claim for priority as required by 35 U.S.C. 119(b) and 37 CFR 1.55(a).									
					Rer	nove			
Application Number	Country	i 	Parent Filing Date	(YYYY-N	ИM-DD)	Priority Claime			
PCT/AU2004/001499	AU		2004-10-29			Yes    No			
Additional Foreign Priority Data may be generated within this form by selecting the Add button.									
Assignee Informa	ation:								
Providing this information in the application data sheet does not substitute for compliance with any requirement of part 3 of Title 37 of the CFR to have an assignment recorded in the Office.									
Assignee 1					Rer	nove			
If the Assignee is an Org	ganization check here.	<b>✓</b>							

PTO/SB/14 (08-05) Approved for use through 07/31/2006. OMB 0651-0032

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7 CER 1 76	Attorney Docket Number								
A	Application Number								
ND PROCESS FOR F	OR FACILITATING THE PROVISION OF HEALTH CARE								
Organization Name PATIENTRACK PTY LTD.									
TIENTRACK PTY LTD.									
Mailing Address Information:									
P. O. Box 119									
nadale, Victoria	State/Provin	се							
	Postal Code	3143							
	Fax Number								
	<u>.</u>								
Additional Assignee Data may be generated within this form by selecting the Add button.									
	CFR 1.76  PROCESS FOR  TRACK PTY LTD.  Box 119  adale, Victoria	Application Number  D PROCESS FOR FACILITATING THE PROVIS  TRACK PTY LTD.  Box 119  Adale, Victoria  State/Provin  Postal Code  Fax Number							

## Signature:

A signature of the applicant or representative is required in accordance with 37 CFR 1.33 and 10.18. Please see 37 CFR 1.4(d) for the form of the signature.									
Signature D				Date (YYYY-MM-DD)					
First Name	MARSH	Last Name	WENDY	Registration Number	39,705				

This collection of information is required by 37 CFR 1.76. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 23 minutes to complete, including gathering, preparing, and submitting the completed application data sheet form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.** 

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